

Docket No. 0028/71160/JPW/BJA

AF/EIFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Veneta Hanson and Harry Spiera

Serial No. : 10/676,691 Examiner: J.L. Grun

Filed : September 30, 2003 Group Art Unit: 1641

For : DIAGNOSTIC TEST FOR NEUROPSYCHIATRIC SYSTEMIC LUPUS

ERYTHEMATOSUS

Mail Stop Amendment
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Date: September 26, 2006

Sir:

Transmitted herewith is an amendment to the above-identified application.

Small entity status of this application under 37 C.F.R. § 1.9 and § 1.27 has been previously established.

A verified statement to establish small entity status under 37 C.F.R. § 1.9 and § 1.27 is enclosed.

☒ No additional fee is required.

The filing fee is calculated as follows:

	Number after Amendment	Highest Number Previously Paid For ¹	Number of Extra Claims Presented	RATE			FEE	
				Small Entity	Other Entity		Small Entity	Other Entity
Total Claims	18 -	* 21 =	*** 0 X	\$25	\$50	=	0	
Independent Claims	4 -	** 4 =	*** 0 X	\$100	\$200	=	0	
Multiple Dependent Claim(s) Presented For First Time Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				\$180	\$360	=	0	
				TOTAL ADDITIONAL FEE \$ 0				

¹ The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".



SEP 28 2006 Applicant(s): Veneta Hanson and Harry Spiera

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Amendment Transmittal Letter
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The following are also enclosed:

X One additional copy of this Amendment Transmittal Letter

X Return Receipt Postcard

 An Information Disclosure Statement, including Form PTO-1449

(Copies of citations included: Yes _____ No _____)

and a fee of \$ included)

_____ A Petition for an Extension of Time, including a fee of
\$ _____ for a Petition for _____ Month(s) Extension of Time

_____ Other (identify): _____

THE TOTAL FEE DUE IS \$ 0.00


A check in the amount of \$_____ is enclosed.

_____ Please charge Deposit Account No. _____ in the amount of
\$ _____.

X The Commissioner is hereby authorized to charge any additional fees required or credit any overpayment to Deposit Account No. 03-3125 as follows:

<u>X</u>	Fees under 37 C.F.R. §1.16 for the presentation of extra claims Patent application processing fees under 37 C.F.R. §1.17
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Respectfully submitted,



John P. White
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I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to:
Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450.

John P. White
Reg. No. 28,678

Date _____



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1185 Avenue of the Americas
New York, New York 10036
September 26, 2006

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Commissioner for Patents
P.O. Box 1450
Arlington, VA 22313-1450

Sir:

AMENDMENT IN RESPONSE TO JUNE 28, 2006 OFFICE ACTION

This is a response to a Final Office Action issued by the U.S. Patent and Trademark Office on June 28, 2006 in connection with the above-identified application. A response to the June 28, 2006 Office Action is due September 28, 2006. Accordingly, this response is being timely filed.

Please amend the subject application as follows: